FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instruction		Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5
R.R. Donnelley	v & Sons Company Good Gover	nment Fund	
ADDRESS (number and s	treet) 111 S. Wacker Dr.		
(Check if address is changed)	Chicago		IL
001441775510 5 1441	4.4000500	CITY	STATE▲ ZIP CODE ▲
carrie.gladney			
COMMITTEE'S WEB I	PAGE ADDRESS (URL)		
COMMITTEE'S FAX N 312-326-8494	UMBER		
2. DATE 0.5	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
3. FEC IDENTIFICATION	TION NUMBER	C C00033977	
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)	
I certify that I have examin	ned this Statement and to the best of my kn	owledge and belief it is true, correct and	d complete
Type or Print Name of	Treasurer Mr. Michael D. I	Manzella	
Signature of Treasurer	Electronically Filed by Mr. Michael	ael D. Manzella	Date 05 / 09 / 2008
NOTE: Submission of fals	se, erroneous, or incomplete information ma	ay subject the person signing this State	· · · · · · · · · · · · · · · · · · ·
Office Use Only FE3AN042.PDF		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	

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5.	TYPE OF COM	//MITTEE (Check One)	
	(a) (b)	This committee is a principal campaign committee. (Complete the candidate information below.) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate
	Name of Candidate		
	Candidate Party Affiliation	Office Sought: House Senate President	State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate		
	(d) X (e) X (f)	This committee is a (National, State (or subordinate) committee of the This committee is a separate segregated fund This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee.	(Democratic, Republican,etc.) Party. ed fund or party
6.	Name of Any	Connected Organization or Affiliated Committee	
L			
L			
	Mailing Addres	ss	
		CITY▲ STATE▲	ZIP CODE
	Relationship		
	Type of Conne	cted Organization:	
	Corpo	ration Corporation w/o Capital Stock Labor Organ	nization
	Meml	pership Organization Trade Association Cooperative	

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Write or Type Comm	nittee Name					
R.R. Donnelle	ey & Sons Comp	any Good Government Fund	d			
	ecords: Identify b Committee books	by name, address, (phone nun and records.	nber optional), and pos	sition of the	e person in	
Full Name	Carrie L Glad	dney				
Mailing Address		111 S. Wacker Dr.				
		Chicago		60606 _		
Title or Position 1	▼	CITY 🛦	STA	TE▲	ZIP CO	DE A
	Coordinator, Ex	terna	Telephone number	312		8031
		ddress (phone number optic nated agent (e.g., assistant tre D. Manzella		he committ	ee; and the	
Mailing Address		111 S. Wacker Dr.				
		Chicago			60606	
Title or Position 1	₩	CITY A	STA	TE▲	ZIP CO	DE A
	VP EH&S		Telephone number	312	_ <u>326</u> _	8031
Full Name of Designated Agent						
Mailing Address						
Title or Position 1		CITY A	STA	TE 4	ZIP COI	DE A
		**	Telephone number			
			. Ciopriorio Harrisoi			

	FEC Form 1	(Revised 02/2	2003	3)																										_		Pa	age	4		_
9.	Banks or Other D safety deposit box Name of Bank, De	es or maintains			all b	oan	ks (or c	othe	er d	epo	sito	orie	s in	wh	iich	the	e cc	omr	nitte	е с	dep	osi	ts fi	unc	ds,	hol	ds	acc	iuo	nts,	, re	nts			
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										CI	ΤY	Δ										S	TΑ	TE.	Δ					ZII	ΡC	;OE	ÞΕ	Δ	.	
	Name of Bank, De	epository, etc.																																		
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	Mailing Address					ı		ı		1										- 1		1					l	l	1	L	L	L	L	L		
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CITY 🔼

STATE ▲

ZIP CODE 🛕